

Referral Criteria for Surgical Assessment of Osteoarthritis of the Hip (Including consideration of Hip Replacement Surgery)

CRITERIA BASED ACCESS

Wiltshire CCG will only fund assessment when:

- A minimum of 6 months of conservative measures have failed

AND

- The following criteria have been met:
 - Intense to severe persistent pain (defined overleaf) which leads to severe functional limitations.

OR

- Minor or moderate functional limitation affecting the patient's quality of life despite 6 months of conservative measures*.

Exceptions include:

- a. Patients whose pain is so severe and/or mobility is compromised such that they are in immediate danger of losing their independence or ability to work AND joint replacement would relieve this.
- b. Patients in whom the destruction of their joint is of such severity that delaying surgical correction would increase the technical difficulties of the procedure.

Please provide details of the following within the referral:

- Confirmation that the patient would be willing to progress to surgery if deemed appropriate
- Details of non-operative management to date
- Details of referral to physiotherapy where appropriate
- Patients fitness for surgery i.e. all chronic medical conditions are optimised
- Functional limitation
- Oxford hip score to be generally < 24
- Demonstration of the patient's commitment to self-management to improve their symptoms to include:
 - i. All patients who smoke should be referred to appropriate smoking cessation services.
 - ii. Weight management interventions where appropriate, over a 6 month period with documented evidence of weight loss with dates and intervention types.

*Conservative measures recommended by NICE:

1. Weight reduction. A higher BMI increases anaesthetic risk, complication rates including infection and post-operative thrombo-embolism.
2. Appropriate analgesia
3. Patient education such as elimination of damaging influence on hips, activity modification (avoid impact and excessive exercise), good shock-absorbing shoes and lifestyle.

Reference:	Policy Name	Date of WCAG	Date of QCAG	Review Date	Version
WCCG-CP050	Hip Surgery	20/03/2018	06/03/2018	March 2021	1

Definitions and classification of symptoms

PAIN

Slight

- Sporadic pain.
- Pain when climbing/descending stairs.
- Allows daily activities to be carried out (those activities requiring greater physical activity may be limited). Medication, aspirin, paracetamol or NSAIDs to control pain with no/few side effects.

Moderate

- Occasional pain.
- Pain when walking on level surfaces (half an hour, or standing).
- Some limitation of daily activities.
- Medication, aspirin, paracetamol or NSAIDs to control with no/few side effects.

Intense

- Pain of almost continuous nature.
- Pain when walking short distances on level surfaces or standing for less than half an hour.
- Daily activities significantly limited.
- Continuous use of NSAIDs for treatment to take effect.
- Requires the sporadic use of support systems (walking stick, crutches).

Severe

- Continuous pain.
- Pain when resting.
- Daily activities significantly limited constantly.
- Continuous use of analgesics - narcotics/NSAIDs with adverse effects or no response.
- Requires more constant use of support systems (walking stick, crutches).

FUNCTIONAL LIMITATIONS

Minor

- Functional capacity adequate to conduct normal activities and self-care.
- Walking capacity of more than one hour.
- No aids needed.

Moderate

- Functional capacity adequate to conduct normal activities and self-care
- Walking capacity of about one half hour.

Severe

- Largely or wholly incapacitated
- Walking capacity of less than half hour or unable to walk or bedridden
- Aids such as a cane, a walker or a wheelchair are required

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WCCG-CP050	Hip Surgery	20/03/2018	06/03/2018	March 2021	1